

Cost of processing a single client account	\$9	\$8.8	\$6.5	\$5.5	\$5.0
Profit per account	\$3	\$3.2	\$5.5	\$6.5	\$7.0

The falling marginal cost relates primarily to the efficiency of operators in processing accounts. We assume that operators reach a western level of efficiency (2000 accounts per operator) only in the year 2000. In our assumptions, in the first 18 months of operation operators process accounts at only 40% the efficiency of their western counterparts.

The key variable that is likely to determine the success of the venture is the number of client accounts. Here again we want to be conservative in our representations to you and Nancy. We assume that we go from processing 31,000 accounts in the beginning of ~~1996~~ 1996 to 238,000 accounts in the beginning of the year 2000. Under these assumptions, the Specialized Depository becomes cash flow positive in the third quarter of its operation and gives profit net of Russian tax of about \$600,000 after 3.5 years of operation. Of course, if we were to assume that this Specialized Depository has a large market share and that it were to process millions of accounts, it would be an extremely profitable operation! We are certainly well positioned to achieve such success if Yeltsin wins the election and the mutual fund industry booms in Russia (and we expect both of these things to happen). However, the only scenario that we wish to present to you and Nancy is the conservative scenario that has been presented to you in the original business plan and that is summarized in the table above.

5.0 Our competition. There are two potential sources of competition to this project. They are i) Russian banks and ii) Credit Suisse. We do not think that Russian banks are serious competitors because they are not trusted by the market place. Domestic banks, have a reputation for unbridled opportunism particularly where inside information is available. They also are extremely slow to develop anything new in the way of services. We think that they will watch and wait. Credit Suisse is a more serious threat since it has indicated that it would be interested in this fund administration business and because it is the furthest advanced in custody of any institution in Russia. We think our position is superior to that of Credit Suisse for the following reasons. First, Credit Suisse will not offer clients the registrar (transfer agent) service. Instead they will farm out their customers' register of unitholders to a Russian holder of corporate registers. The company that they have chosen has a dubious reputation in the market place and very Russian concept of client service and confidentiality.

Second, Credit Suisse has explicitly stated that they will not offer the service to clients until they have launched their own fund in order to create/maintain a barrier to entry (remember without a depository a fund can't be licensed). The Federal Commission will resist any attempt by a fund manager to block entry of competing funds in this way (Pioneer in Poland is a perfect example of what the Federal Commission intends not to happen in Russia). Finally, Credit Suisse will not have access to the technical assistance nor to the inside track afforded by the technical assistance to the Federal Commission.

6.0 Connection with the Fund Management Company. You have received a business plan from Elizabeth Hebert for investment in a fund management company. The Specialised Depository and the Fund Management Company are being offered to you as a package. We are not interested in your investment in the Specialised Depository unless this is helpful to raise the funds needed to start the Fund Management Company. This is for several reasons. First, the success of the Specialised Depository will be increased if we have a lead respected client to start things off. A fund managed by Elizabeth Hebert would have this effect as discussed above. Second, the Federal Commission will not license the Specialised Depository except as a package with its first client. For this reason we think that it is important to have control over the first client to ensure that there are no problems or friction in the set up stage. Third, we frankly want to start both of these things at the same time and are tying our futures to this strategy. We would like our backers to do the same with their investment.

7.0 I hope that this is a helpful summary of the Specialized Depository project. This work is on a short fuse. If you are interested in participating in the initial investment, it is important to block out some time to focus on this project. The Specialized Depository already has financing in place. If worse comes to worse it can be financed by the strategic partner. He has already indicated his willingness to do so (under this scenario we would still get 51% of it). If you are willing to participate in the financing of the Fund Management Company (even on a modest scale), we are ready to offer you an opportunity to invest in the Specialized Depository.

8.0 I look forward to talking with you about the proposal.

## **Annex 1: Functions of the Specialized Depository**

Under the current regulations the Specialized Depository plays both a traditional custodial role and a compliance function.

### *Custody*

As the custodian of the mutual fund the specialized depository's functions include:

- holding of assets and accompanying ownership records
- cash control accounting, where separate payment and disbursement accounts are maintained by the specialized depository on behalf of the fund and reconciled on a regular basis with fund accounting
- recording and accounting for capital and income received by the fund through investment of fund assets
- processing corporate actions notifications from investee issuers and acting on the instructions of the fund manager with regard to such actions
- documenting authorisations on fund transactions
- receipt of payments from subscriptions and payment for unit redemptions upon appropriate instructions
- payment for fund expenses at the direction of the fund manager
- settling all securities transactions with the market

### *Specialised Registrar and Unitholder administration*

The specialised registrar function requires the specialised depository to control various aspects of the relationship between the unit holder and the fund manager including:

- maintaining the register of unitholders,
- processing unit purchases and redemptions, order verification and data entry, processing, verification and reconciliation of transactions of unit sales and redemptions as reported,
- documenting all changes to the register unrelated to creation or cancellation of units (i.e. change of address),
- responding to customer service inquiries,
- mailing informational materials upon instruction of the fund manager.

### *Fund Accounting and Valuation*

MAY-28-1996 17:15 FROM ILBE

TO

8101617349370E P.07

The Specialized Depository would also hope be offer the following (in fact this requires certain modification to existing regs, but we expect this to be achievable):

securities valuation, which must be conducted daily using price quotes obtained from reputable sources (e.g., The Russian Trading System),  
processing of corporate actions, including stock splits and dividend payments, which can effect the total value of the funds assets,  
accounting and accruing of Fund expenses and income in compliance with the applicable regulations,  
calculation of the net asset value (NAV) of the fund based on daily reports received.

In addition to the traditional role of a fund administrator the current regulations require that the the specialised depository assumes a regulatory function on behalf of the Commission and is responsible for reporting all improprieties of the fund manager to the Commission.

① Real Estate License

② 5% of ~~assets~~ assets based  
fee.

③ 5% of ~~assets~~ Depository  
Revenues.

Want Real Estate

① Nancy

② Jonathon

③ Real Estate License

100 for 5%

Need negotiate first on  
Universal mutual fund

transfer license to accept  
bank interest

Am diluted idam.

APR-29-1996 17:21 FROM ILRE

TO

92583131 P.01

**International Institute for  
Law-Based Economy  
FOUNDATION**

Detroit Plaza, 5th Floor  
8750 GLDensho  
Monroeville, Pa 15147

Copy for F.O.W.  
JUP

**Fax Cover Sheet**

DATE: 29-04-96  
TO: Michael Oster

PHONE: 258-3130

FAX: 258-3121

FROM: JONATHAN MAY

PHONE: (+7501) 258 3570

FAX: (+7501) 258 3563

RE: Draft Terms of Agreement

Number of pages including cover sheet: 2  
Message

& return to PCA

to: PCA  
&  
JH

(copy, please give a  
copy to each.)

Thx MJD

created in the project with Elizabeth Hubert.

APR-29-1996 17:21 FROM ILBE

TO

92583131 P.03

April 29, 1996

To: Michael Oster

From: Jonathan Hay

Re: Draft Terms of Agreement

*Guys, these are  
the things that I  
suggested to Jonathan  
that we must accomplish*

1. This memo is to confirm the conversation that we had on Friday.
2. As we discussed, I would put together a small team (Real Estate Services Group) which would include myself and a number of Russian colleagues to provide services to CPI in the following areas:
  - a. systemization of legal analysis for projects,
  - b. creation of standard templates and structures for different types of transactions
  - c. organization of closure process both in terms of standardizing work flows in general, as well as with respect to specific transactions,
  - e. development of asset management function,
  - f. development of control function.

We could begin immediately with those areas of work that are of the highest priority to you.

Compensation: Services should be compensated at hourly rates, except for organization of closings which should contain a success fee in order to motivate the Real Estate Services Group to quickly realize CPI objectives.

3. The Real Estate Services Group would form an entity jointly with CPI (or sign a contract on joint activity) that would have the goal of purchasing, developing and managing real estate projects in Russia's regions. The Real Estate Services Group would be responsible for identifying properties, establishing relationships with local administrations, structuring transactions. CPI would be responsible for providing strategic direction, advising the development process, and for organizing the financing of project.

Compensation: Equity would either be divided on a deal by deal basis or globally through the entity created above. Your thoughts on an appropriate and fair way to organize compensation are needed here.

4. Real Estate Mutual Fund. The Real Estate Services Group should also form together with CPI a domestic mutual fund to invest in real estate. This project would combine expertise of CPI, Real Estate Services Group, and piggyback on the mutual fund infrastructure being created in the project with Elizabeth Hebert.

*• Jonathan's commitment ?  
• CPI control*

**FEDERAL CASH TRANSACTIONS REPORT**

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

Office of Management and Budget, No. 80-RO182

1. Federal agency and organizational element to which this report is submitted Agency for International Development

Washington, D.C. 20503

**2. RECIPIENT ORGANIZATION**

PRESIDENT &amp; FELLOWS OF HARVARD COLLEGE

Name Office for Sponsored Research

Number Holyoke Center - Room 466

and Street 1350 Massachusetts Avenue

Cambridge, MA 02138

City, State  
and ZIP Code:**3. FEDERAL EMPLOYER  
IDENTIFICATION NO.**

04210350

4. Federal grant or other identifica-  
tion number See 272A5. Recipient's account number  
identifying number See 272A6. Letter of credit number  
720014687. Last payment voucher number  
176

Give total number for this period

8. Payment Vouchers credited to  
your account 29. Treasury checks received (whether  
or not deposited) N/A**10. PERIOD COVERED BY THIS REPORT**FROM (month, day, year)  
7/01/94TO (month, day, year)  
7/31/94**11. STATUS OF**

FEDERAL

CASH

(See specific  
instructions  
on the back)

a. Cash on hand beginning of reporting period DEFICIT \$ (1,393,738.14)

b. Letter of credit withdrawals 2,087,000.00

c. Treasury check payments 0.00

d. Total receipts (Sum of lines b and c) 2,087,000.00

e. Total cash available (Sum of lines a and d) 693,261.86

f. Gross disbursements 1,295,854.93

g. Federal share of program income 0.00

h. Net disbursements (Line f minus line g) 1,295,854.93

i. Adjustments of prior periods 0.00

j. Cash on hand end of period DEFICIT \$ (602,593.07)

**12. THE AMOUNT SHOWN  
ON LINE 11j, ABOVE,  
REPRESENTS CASH RE-  
QUIREMENTS FOR THE  
ENSUING**

Days

**13. OTHER INFORMATION**

a. Interest income \$

b. Advances to subgrantees or subcontractors \$

**14. REMARKS (Attach additional sheets of plain paper, if more space is required)****15. CERTIFICATION**I certify to the best of my  
knowledge and belief that  
this report is true in all re-  
spects and that all disburse-  
ments have been made for  
the purpose and conditions  
of the grant or agreementAUTHORIZED  
CERTIFYING  
OFFICIAL

SIGNATURE

TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

8/12/94

TELEPHONE (Area Code,  
Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

8/30/94  
JP



# FEDERAL CASH TRANSACTIONS REPORT

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

Approved: \_\_\_\_\_  
Office of Management and Budget, No. 80-RO182  
1. Federal reporting agency and organizational element to which this report is submitted: \_\_\_\_\_  
Agency for International Development  
Washington, D.C. 20503

## 2. RECIPIENT ORGANIZATION

NAME: PRESIDENT & FELLOWS OF HARVARD COLLEGE  
Office for Sponsored Research  
Holyoke Center - Room 466  
1350 Massachusetts Avenue  
Cambridge, MA 02138

City, State and ZIP Code:

## 3. FEDERAL EMPLOYER IDENTIFICATION NO.

04210350

4. Federal grant or other identification number See 272A  
5. Recipient's account number or identifying number See 272A  
6. Letter of credit number 72001468  
7. Last payment voucher number 178 ✓  
8. Payment Vouchers credited to your account 2  
9. Treasury checks received (whether or not deposited) N/A

Give total number for this period

## 10. PERIOD COVERED BY THIS REPORT

FROM (month, day, year) 8/01/94 TO (month, day, year) 8/31/94

## 11. STATUS OF FEDERAL CASH

(See specific instructions on the back)

a. Cash on hand beginning of reporting period	DEFICIT	\$ (602,593.07)
b. Letter of credit withdrawals		1,932,000.00 *
c. Treasury check payments		0.00
d. Total receipts (Sum of lines b and c)		1,932,000.00
e. Total cash available (Sum of lines a and d)		1,329,406.93
f. Gross disbursements		2,316,569.00
g. Federal share of program income		0.00
h. Net disbursements (Line f minus line g)		2,316,569.00
i. Adjustments of prior periods		0.00
j. Cash on hand end of period	DEFICIT	\$ (987,162.07)

## 12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING

Days

## 13. OTHER INFORMATION

a. Interest income	\$
b. Advances to subgrantees or subcontractors	\$

## 14. REMARKS (Attach additional sheets of plain paper, if more space is required)

## 15.

### CERTIFICATION

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
CERTIFYING  
OFFICIAL

SIGNATURE

*Marisa Schasel*

TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

9/13/94

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

\* Includes RGN 178 for \$1,329,000 paid early 9/94.

9/20/94  
JP

# FEDERAL CASH TRANSACTIONS REPORT

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

Approved: \_\_\_\_\_ Office of Management and Budget, No. 80-RO182  
 1. Federal agency and organizational statement to which this report is submitted

Agency for International Development  
 Washington, D.C. 20503

4. Federal grant or other identification number See 272A  
 5. Recipient's account number or identifying number See 272A

6. Letter of credit number 72001468  
 7. Last payment voucher number 180

Give total number for this period

8. Payment Vouchers credited to your account 2  
 9. Treasury checks received (whether or not deposited) N/A

## 2. RECIPIENT ORGANIZATION

Name: PRESIDENT & FELLOWS OF HARVARD COLLEGE  
 Office for Sponsored Research  
 Number: Holyoke Center - Room 466  
 and Street: 1350 Massachusetts Avenue  
 Cambridge, MA 02138

City, State and ZIP Code:

## 3. FEDERAL EMPLOYER IDENTIFICATION NO.

04210350

10. PERIOD COVERED BY THIS REPORT

FROM (month, day, year) 9/01/94  
 TO (month, day, year) 9/30/94

## 11. STATUS OF

FEDERAL

CASH

(See specific instructions on the back)

a. Cash on hand beginning of reporting period	DEFICIT	\$ (987,162.07)
b. Letter of credit withdrawals		2,387,000.00 *
c. Treasury check payments		0.00
d. Total receipts (Sum of lines b and c)		2,387,000.00
e. Total cash available (Sum of lines a and d)		1,399,837.93
f. Gross disbursements		2,651,928.36
g. Federal share of program income		0.00
h. Net disbursements (Line f minus line g)		2,651,928.36
i. Adjustments of prior periods		0.00
j. Cash on hand end of period	DEFICIT	\$ (1,252,090.43)

## 12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING

Days

13. OTHER INFORMATION	
a. Interest income	\$ -
b. Advances to subgrantees or subcontractors	\$

## 14. REMARKS (Attach additional sheets of plain paper, if more space is required)

## 15.

### CERTIFICATION

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
 CERTIFYING  
 OFFICIAL

SIGNATURE

*Marisa Schasel*

TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

10/12/94

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

\* Missing RQW 178 for \$1,329,000 paid 9/1/94 - see previous report.

10/17/94  
 9P

**FEDERAL CASH TRANSACTIONS REPORT**

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

**2. RECIPIENT ORGANIZATION**

Name PRESIDENT & FELLOWS OF HARVARD COLLEGE  
Office for Sponsored Research  
Number and Street : Holyoke Center - Room 466  
1350 Massachusetts Avenue  
Cambridge, MA 02138

City, State and ZIP Code:

**3. FEDERAL EMPLOYER IDENTIFICATION NO.**

04210350

**1. Federal sponsoring agency and organizational element to which this report is submitted**Agency for International Development  
Washington, D.C. 20503**4. Federal grant or other identification number**

See 272A

**5. Recipient's account number or identifying number**

See 272A

**6. Letter of credit number**

72001468

**7. Last payment voucher number**

182 ✓

Give total number for this period

**8. Payment Vouchers credited to your account**

2

**9. Treasury checks received (whether or not deposited)**

N/A

**10. PERIOD COVERED BY THIS REPORT**

FROM (month, day, year)

10/01/94

TO (month, day, year)

10/31/94

**11. STATUS OF**

FEDERAL

CASH

(See specific instructions on the back)

**a. Cash on hand beginning of reporting period**

DEFICIT

\$ (1,252,090.43)

**b. Letter of credit withdrawals**

2,652,000.00 ✓

**c. Treasury check payments**

0.00

**d. Total receipts (Sum of lines b and c)**

2,652,000.00

**e. Total cash available (Sum of lines a and d)**

1,399,909.57

**f. Gross disbursements**

2,358,834.78

**g. Federal share of program income**

0.00

**h. Net disbursements (Line f minus line g)**

2,358,834.78

**i. Adjustments of prior periods**

0.00

**j. Cash on hand end of period**

DEFICIT

\$ (958,925.21)

**12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING**

Days

**13. OTHER INFORMATION****a. Interest income**

\$

**b. Advances to subgrantees or subcontractors**

\$

**14. REMARKS (Attach additional sheets of plain paper, if more space is required)****15.****CERTIFICATION**

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
CERTIFYING  
OFFICIAL

SIGNATURE

Marisa Schasel

TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

11/08/94

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

11/15/94  
9B

**FEDERAL CASH TRANSACTIONS REPORT**

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

Approved: Office of Management and Budget, No. 80-RO182

1. Federal sponsoring agency and organizational element to which this report is submitted  
Agency for International Development  
Washington, D.C. 20503**2. RECIPIENT ORGANIZATION**

Name PRESIDENT & FELLOWS OF HARVARD COLLEGE  
Office for Sponsored Research  
Number and Street Holyoke Center - Room 466  
1350 Massachusetts Avenue  
Cambridge, MA 02138

City, State and ZIP Code:

4. Federal grant or other identification number  
See 272A5. Recipient's account number or identifying number  
See 272A6. Letter of credit number  
720014687. Last payment voucher number  
184 103

Give total number for this period

8. Payment Vouchers credited to your account  
29. Treasury checks received (whether or not deposited)  
N/A**10. PERIOD COVERED BY THIS REPORT**FROM (month, day, year)  
11/01/94TO (month, day, year)  
11/30/94**3. FEDERAL EMPLOYER IDENTIFICATION NO.**

04210350

**11. STATUS OF  
FEDERAL  
CASH**

(See specific instructions on the back)

a. Cash on hand beginning of reporting period	DEFICIT	\$ (958,925.21)
b. Letter of credit withdrawals		959,000.00 ✓
c. Treasury check payments		0.00
d. Total receipts (Sum of lines b and c)		959,000.00
e. Total cash available (Sum of lines a and d)		74.79
f. Gross disbursements		1,469,714.01
g. Federal share of program income		0.00
h. Net disbursements (Line f minus line g)		1,469,714.01
i. Adjustments of prior periods		0.00
j. Cash on hand end of period	DEFICIT	\$ (1,469,639.22)

**12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING**

Days

**13. OTHER INFORMATION**

a. Interest income

\$

b. Advances to subgrantees or subcontractors

\$

**14. REMARKS (Attach additional sheets of plain paper, if more space is required)**

[ See Attached Sheet ]

**15. CERTIFICATION**

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
CERTIFYING  
OFFICIAL

SIGNATURE

  
 TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

12/16/94

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

1/5/95  
90

**FEDERAL CASH TRANSACTIONS REPORT**

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

1. Federal sponsoring agency and organizational element to which this report is submitted

Agency for International Development

Washington, D.C. 20503

**2. RECIPIENT ORGANIZATION**

Name PRESIDENT &amp; FELLOWS OF HARVARD COLLEGE

Office for Sponsored Research

Number and Street Holyoke Center - Room 466

1350 Massachusetts Avenue

Cambridge, MA 02138

City, State and ZIP Code:

4. Federal grant or other identification number See 272A

5. Recipient's account number or identifying number See 272A

6. Letter of credit number 72001468

7. Last payment voucher number 185

Give total number for this period

8. Payment Voucher credited to your account 2

9. Treasury checks received (whether or not deposited) N/A

**10. PERIOD COVERED BY THIS REPORT**FROM (month, day, year)  
12/01/94TO (month, day year)  
12/31/94**3. FEDERAL EMPLOYER IDENTIFICATION NO.**

04210350

**11. STATUS OF**

FEDERAL

CASH

(See specific instructions on the back)

a. Cash on hand beginning of reporting period DEFICIT \$ (1,469,639.22)

b. Letter of credit withdrawals 2,520,000.00

c. Treasury check payments 0.00

d. Total receipts (Sum of lines b and c) 2,520,000.00

e. Total cash available (Sum of lines a and d) 1,050,360.78

f. Gross disbursements 2,567,716.25

g. Federal share of program income 0.00

h. Net disbursements (Line f minus line g) 2,567,716.25

i. Adjustments of prior periods 0.00

j. Cash on hand end of period DEFICIT \$ (1,517,355.47)

12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING

Days

**13. OTHER INFORMATION**

a. Interest income \$

b. Advances to subgrantees or subcontractors \$

14. REMARKS (Attach additional sheets of plain paper, if more space is required)

**15.****CERTIFICATION**

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
CERTIFYING  
OFFICIAL

SIGNATURE

Marisa Schasel

TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

1/17/95

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

2/1/95  
9p

**FEDERAL CASH TRANSACTIONS REPORT**

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

Approved: Office of Management and Budget, No. 80-RO182

1. Federal sponsoring agency and organizational element to which this report is submitted  
Agency for International Development  
Washington, D.C. 20503**2. RECIPIENT ORGANIZATION**Name: PRESIDENT & FELLOWS OF HARVARD COLLEGE  
Office for Sponsored Research  
Number and Street: Holyoke Center - Room 466  
1350 Massachusetts Avenue  
City, State and ZIP Code: Cambridge, MA 021384. Federal grant or other identification number  
See 272A5. Recipient's account number or identifying number  
See 272A6. Letter of credit number  
720014687. Last payment voucher number  
190

Give total number for this period

8. Payment Vouchers credited to your account  
39. Treasury checks received (whether or not deposited)  
N/A**3. FEDERAL EMPLOYER IDENTIFICATION NO.**

04210350

**10. PERIOD COVERED BY THIS REPORT**FROM (month, day, year)  
2/01/95TO (month, day year)  
2/28/95**11. STATUS OF**

FEDERAL

CASH

(See specific instructions on the back)

a. Cash on hand beginning of reporting period

DEFICIT

\$ (776,004.16)

b. Letter of credit withdrawals

2,313,000.00

c. Treasury check payments

0.00

d. Total receipts (Sum of lines b and c)

2,313,000.00

e. Total cash available (Sum of lines a and d)

1,536,995.84

f. Gross disbursements

1,956,452.72

g. Federal share of program income

0.00

h. Net disbursements (Line f minus line g)

1,956,452.72

i. Adjustments of prior periods

0.00

j. Cash on hand end of period

DEFICIT

\$ (419,456.88)

**12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING**

Days

**13. OTHER INFORMATION**

a. Interest income

\$

b. Advances to subgrantees or subcontractors

\$

**14. REMARKS (Attach additional sheets of plain paper, if more space is required)****15.****CERTIFICATION**

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
CERTIFYING  
OFFICIAL

SIGNATURE

Marisa Schasel

TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

3/09/95

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

3/14/95  
JP

**FEDERAL CASH TRANSACTIONS REPORT**

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

Office of Management and Budget, No. 80-RO182  
 1. Federal sponsoring agency and organizational element to which this report is submitted  
 Agency for International Development  
 Washington, D.C. 20503

**2. RECIPIENT ORGANIZATION**

Name PRESIDENT & FELLOWS OF HARVARD COLLEGE  
 Office for Sponsored Research  
 Number and Street Holyoke Center - Room 466  
 1350 Massachusetts Avenue  
 Cambridge, MA 02138

City, State and ZIP Code:

4. Federal grant or other identification number See 272A  
 5. Recipient's account number or identifying number See 272A

6. Letter of credit number 72001468  
 7. Last payment voucher number 194 ✓

Give total number for this period

8. Payment Vouchers credited to year account 4  
 9. Treasury checks received (whether or not deposited) N/A

**10. PERIOD COVERED BY THIS REPORT****3. FEDERAL EMPLOYER IDENTIFICATION NO.**

04210350

FROM (month, day, year) 3/01/95  
 TO (month, day year) 3/31/95

**11. STATUS OF**

FEDERAL

CASH

(See specific instructions on the back)

a. Cash on hand beginning of reporting period	DEFICIT	\$ (419,456.88)
b. Letter of credit withdrawals		2,022,000.00 ✓
c. Treasury check payments		0.00
d. Total receipts (Sum of lines b and c)		2,022,000.00
e. Total cash available (Sum of lines a and d)		1,602,543.12
f. Gross disbursements		2,330,216.36
g. Federal share of program income		0.00
h. Net disbursements (Line f minus line g)		2,330,216.36
i. Adjustments of prior periods		0.00
j. Cash on hand end of period	DEFICIT	\$ (727,673.24)

**12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING**

Days

**13. OTHER INFORMATION**

a. Interest income	\$ "
b. Advances to subgrantees or subcontractors	\$

**14. REMARKS (Attach additional sheets of plain paper, if more space is required)****15.****CERTIFICATION**

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
 CERTIFYING  
 OFFICIAL

SIGNATURE



TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

4/12/95

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

5/11/95  
 90



**FEDERAL CASH TRANSACTIONS REPORT**

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

Approved: \_\_\_\_\_  
 Office of Management and Budget, No. 80-RO182  
 1. Federal sponsoring agency and organizational element to which this report is submitted  
 Agency for International Development  
 Washington, D.C. 20503

**2. RECIPIENT ORGANIZATION**

Name **PRESIDENT & FELLOWS OF HARVARD COLLEGE**  
 Office for Sponsored Research  
 Number and Street Holyoke Center - Room 466  
 1350 Massachusetts Avenue  
 Cambridge, MA 02138

City, State and ZIP Code:

4. Federal grant or other identification number See 272A  
 5. Recipient's account number or identifying number See 272A

6. Letter of credit number  
 72001468

7. Last payment voucher number  
 199

Give total number for this period

8. Payment Vouchers credited to your account  
 5

9. Treasury checks received (whether or not deposited)  
 N/A

**10. PERIOD COVERED BY THIS REPORT**

FROM (month, day, year)  
 4/01/95

TO (month, day year)  
 4/30/95

**3. FEDERAL EMPLOYER IDENTIFICATION NO.**

04210350

**11. STATUS OF**

FEDERAL

CASH

(See specific instructions on the back)

a. Cash on hand beginning of reporting period	DEFICIT	\$ (727,673.24)
b. Letter of credit withdrawals		2,294,000.00
c. Treasury check payments		0.00
d. Total receipts (Sum of lines b and c)		2,294,000.00
e. Total cash available (Sum of lines a and d)		1,566,326.76
f. Gross disbursements		1,365,327.50
g. Federal share of program income		0.00
h. Net disbursements (Line f minus line g)		1,365,327.50
i. Adjustments of prior periods		0.00
j. Cash on hand end of period		\$ 200,999.26

**12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING**

3

Days

**13. OTHER INFORMATION**

a. Interest income

\$

b. Advances to subgrantees or subcontractors

\$

**14. REMARKS (Attach additional sheets of plain paper, if more space is required)**

Surplus cash due to credits put through at end of month; surplus position has been fully disbursed within the first week of May.

**15.****CERTIFICATION**

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
 CERTIFYING  
 OFFICIAL

SIGNATURE

*Marisa Schasel*  
 TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

5/09/95

TELEPHONE (Area Code,  
 Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

6/1/95  
 90



**FEDERAL CASH TRANSACTIONS REPORT**

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

**2. RECIPIENT ORGANIZATION**

Name **PRESIDENT & FELLOWS OF HARVARD COLLEGE**  
 Office for Sponsored Research  
 Number and Street **Holyoke Center - Room 466**  
**1350 Massachusetts Avenue**  
**Cambridge, MA 02138**

City, State and ZIP Code:

Approved Office of Management and Budget, No. 80-RO182

1. Federal sponsoring agency and organizational element to which this report is submitted

Agency for International Development  
 Washington, D.C. 20503

4. Federal grant or other identification number  
See 272A5. Recipient's account number or identifying number  
See 272A6. Letter of credit number  
720014687. Last payment voucher number  
204

Give total number for this period

8. Payment Vouchers credited to your account  
59. Treasury checks received (whether or not deposited)  
N/A**3. FEDERAL EMPLOYER IDENTIFICATION NO.**

04210350

**10. PERIOD COVERED BY THIS REPORT**

FROM (month, day, year)

5/01/95

TO (month, day, year)

5/31/95

**11. STATUS OF**

FEDERAL

CASH

(See specific instructions on the back)

a. Cash on hand beginning of reporting period

\$ 200,999.26

b. Letter of credit withdrawals

1,310,000.00

c. Treasury check payments

0.00

d. Total receipts (Sum of lines b and c)

1,310,000.00

e. Total cash available (Sum of lines a and d)

1,510,999.26

f. Gross disbursements

2,072,718.73

g. Federal share of program income

0.00

h. Net disbursements (Line f minus line g)

2,072,718.73

i. Adjustments of prior periods

0.00

j. Cash on hand end of period

DEFICIT

\$ (561,719.47)

**12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING**

Days

**13. OTHER INFORMATION**

a. Interest income

\$

b. Advances to subgrantees or subcontractors

\$

**14. REMARKS (Attach additional sheets of plain paper, if more space is required)****15.****CERTIFICATION**

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
 CERTIFYING  
 OFFICIAL

SIGNATURE

*Marisa Schasel*  
 TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

6/09/95

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

6/15/95  
qp

**FEDERAL CASH TRANSACTIONS REPORT**

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

Approved: Office of Management and Budget, No. 80-RO182

1. Federal sponsoring agency and organizational element to which this report is submitted  
Agency for International Development  
Washington, D.C. 20503**2. RECIPIENT ORGANIZATION**

Name: PRESIDENT & FELLOWS OF HARVARD COLLEGE  
Office for Sponsored Research  
Number and Street: Holyoke Center - Room 466  
1350 Massachusetts Avenue  
Cambridge, MA 02138  
City, State and ZIP Code:

4. Federal grant or other identification number  
See 272A5. Recipient's account number or identifying number  
See 272A6. Letter of credit number  
720014687. Last payment voucher number  
209

Give total number for this period

8. Payment Vouchers credited to your account  
59. Treasury checks received (whether or not deposited)  
N/A**10. PERIOD COVERED BY THIS REPORT****3. FEDERAL EMPLOYER IDENTIFICATION NO.**

04210350

FROM (month, day, year)  
6/01/95TO (month, day year)  
6/01/95**11. STATUS OF  
FEDERAL  
CASH**

(See specific instructions on the back)

a. Cash on hand beginning of reporting period	DEFICIT	\$ (561,719.47)
b. Letter of credit withdrawals		2,062,000.00
c. Treasury check payments		0.00
d. Total receipts (Sum of lines b and c)		2,062,000.00
e. Total cash available (Sum of lines a and d)		1,500,280.53
f. Gross disbursements		2,309,332.87
g. Federal share of program income		0.00
h. Net disbursements (Line f minus line g)		2,309,332.87
i. Adjustments of prior periods		0.00
j. Cash on hand end of period	DEFICIT	\$ (809,052.34)

**12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING**

Days

**13. OTHER INFORMATION**

a. Interest income	\$
b. Advances to subgrantees or subcontractors	\$

**14. REMARKS (Attach additional sheets of plain paper, if more space is required)****15.****CERTIFICATION**

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
CERTIFYING  
OFFICIAL

SIGNATURE



TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

7/13/95

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

7/20/95  
JP

**FEDERAL CASH TRANSACTIONS REPORT**

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

Approved: Office of Management and Budget, No. 80-RO182

1. Federal sponsoring agency and organizational element to which this report is submitted

Agency for International Development

Washington, D.C. 20503

**2. RECIPIENT ORGANIZATION**

Name: PRESIDENT &amp; FELLOWS OF HARVARD COLLEGE

Office for Sponsored Research

Number and Street: Holyoke Center - Room 466

1350 Massachusetts Avenue

Cambridge, MA 02138

City, State and ZIP Code:

4. Federal grant or other identification number  
See 272A5. Recipient's account number or identifying number  
See 272A6. Letter of credit number  
720014687. Last payment voucher number  
209

Give total number for this period

8. Payment Vouchers credited to year account  
59. Treasury checks received (whether or not deposited)  
N/A**10. PERIOD COVERED BY THIS REPORT**FROM (month, day, year)  
6/01/95TO (month, day, year)  
6/30/95**3. FEDERAL EMPLOYER IDENTIFICATION NO.**

04210350

**11. STATUS OF**

FEDERAL

CASH

(See specific instructions on the back)

a. Cash on hand beginning of reporting period	DEFICIT	\$ (561,719.47)
b. Letter of credit withdrawals		2,062,000.00
c. Treasury check payments		0.00
d. Total receipts (Sum of lines b and c)		2,062,000.00
e. Total cash available (Sum of lines a and d)		1,500,280.53
f. Gross disbursements		2,687,886.07
g. Federal share of program income		0.00
h. Net disbursements (Line f minus line g)		2,687,886.07
i. Adjustments of prior periods		0.00
j. Cash on hand end of period	DEFICIT	\$ (1,187,605.54)

**12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING**

Days

**13. OTHER INFORMATION**

a. Interest income	\$ -
b. Advances to subgrantees or subcontractors	\$

**14. REMARKS (Attach additional sheets of plain paper, if more space is required)****15. CERTIFICATION**

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
CERTIFYING  
OFFICIAL

SIGNATURE

Marisa Schasel

TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

7/25/95

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

# FEDERAL CASH TRANSACTIONS REPORT

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

1. Federal reporting agency and organizational element to which this report is submitted  
Agency for International Development  
Washington, D.C. 20503

## 2. RECIPIENT ORGANIZATION

Name PRESIDENT & FELLOWS OF HARVARD COLLEGE  
Office for Sponsored Research  
Number and Street Holyoke Center - Room 466  
1350 Massachusetts Avenue  
City, State and ZIP Code: Cambridge, MA 02138

4. Federal grant or other identification number See 272A  
5. Recipient's account number or identifying number See 272A

6. Letter of credit number 72001468  
7. Last payment voucher number 213

Give total number for this period

8. Payment Vouchers credited to your account 4  
9. Treasury checks received (whether or not deposited) N/A

## 10. PERIOD COVERED BY THIS REPORT

FROM (month, day, year) 7/01/95  
TO (month, day year) 7/31/95

## 3. FEDERAL EMPLOYER IDENTIFICATION NO.

04210350

## 11. STATUS OF

FEDERAL

CASH

(See specific instructions on the back)

a. Cash on hand beginning of reporting period	DEFICIT	\$ (1,187,605.54)
b. Letter of credit withdrawals		2,188,000.00 *
c. Treasury check payments		0.00
d. Total receipts (Sum of lines b and c)		2,188,000.00
e. Total cash available (Sum of lines a and d)		1,000,394.46
f. Gross disbursements		1,232,975.49
g. Federal share of program income		0.00
h. Net disbursements (Line f minus line g)		1,232,975.49
i. Adjustments of prior periods		0.00
j. Cash on hand end of period	DEFICIT	\$ (232,581.03)

12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING

Days

## 13. OTHER INFORMATION

a. Interest income	\$ -
b. Advances to subgrantees or subcontractors	\$

14. REMARKS (Attach additional sheets of plain paper, if more space is required)

## 15.

### CERTIFICATION

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
CERTIFYING  
OFFICIAL

SIGNATURE

TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

8/09/95

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

\* Includes RAN 213 for \$624,000 paid 8/1/95

8/17/95  
90

**FEDERAL CASH TRANSACTIONS REPORT**

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

Approved: Office of Management and Budget, No. 80-RO182

1. Federal sponsoring agency and organizational element to which this report is submitted

Agency for International Development

Washington, D.C. 20503

**2. RECIPIENT ORGANIZATION**

Name PRESIDENT & FELLOWS OF HARVARD COLLEGE  
Office for Sponsored Research  
Number and Street Holyoke Center - Room 466  
1350 Massachusetts Avenue  
Cambridge, MA 02138

City, State and ZIP Code:

4. Federal grant or other identification number See 272A

6. Letter of credit number 72001468

5. Recipient's account number or identifying number See 272A

7. Last payment voucher number 219 ✓

Give total number for this period

8. Payment Vouchers credited to your account 6

9. Treasury checks received (whether or not deposited) N/A

**3. FEDERAL EMPLOYER IDENTIFICATION NO.**

04210350

**10. PERIOD COVERED BY THIS REPORT**

FROM (month, day, year) 8/01/95

TO (month, day year) 8/31/95

**11. STATUS OF**

FEDERAL

CASH

(See specific instructions on the back)

a. Cash on hand beginning of reporting period	DEFICIT	\$ (232,581.03)
b. Letter of credit withdrawals		1,516,000.00
c. Treasury check payments		0.00
d. Total receipts (Sum of lines b and c)		1,516,000.00
e. Total cash available (Sum of lines a and d)		1,283,418.97
f. Gross disbursements		2,094,225.72
g. Federal share of program income		0.00
h. Net disbursements (Line f minus line g)		2,094,225.72
i. Adjustments of prior periods		0.00
j. Cash on hand end of period	DEFICIT	\$ (810,806.75)

**12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING**

Days

**13. OTHER INFORMATION**

a. Interest income

\$

b. Advances to subgrantees or subcontractors

\$

**14. REMARKS (Attach additional sheets of plain paper, if more space is required)****15.****CERTIFICATION**

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED CERTIFYING OFFICIAL

SIGNATURE

TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

9/14/95

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

**THIS SPACE FOR AGENCY USE**

\* Missing ROW 213 for \$ 624,000 paid 8/1/95

10/23/95  
90

**FEDERAL CASH TRANSACTIONS REPORT**

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

Approved: \_\_\_\_\_ Office of Management and Budget, No. 80-RO182  
 1. Federal financing agency and organizational element to which this report is submitted  
 Agency for International Development  
 Washington, D.C. 20503

**2. RECIPIENT ORGANIZATION**

Name: PRESIDENT & FELLOWS OF HARVARD COLLEGE  
 Office for Sponsored Research  
 Number and Street: Holyoke Center - Room 466  
 1350 Massachusetts Avenue  
 Cambridge, MA 02138

City, State and ZIP Code:

4. Federal grant or other identification number See 272A  
 5. Recipient's account number or identifying number See 272A

6. Letter of credit number 72001468  
 7. Last payment voucher number 223

Give total number for this period

8. Payment Vouchers credited to year account 4  
 9. Treasury checks received (whether or not deposited) N/A

**10. PERIOD COVERED BY THIS REPORT**

FROM (month, day, year) 9/01/95  
 TO (month, day, year) 9/30/95

**3. FEDERAL EMPLOYER IDENTIFICATION NO.**

04210350

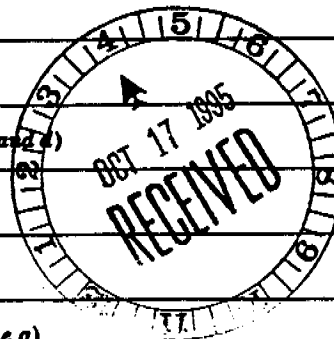
**11. STATUS OF**

FEDERAL

CASH

(See specific instructions on the back)

a. Cash on hand beginning of reporting period	DEFICIT	\$ (810,806.75)
b. Letter of credit withdrawals		2,111,000.00
c. Treasury check payments		0.00
d. Total receipts (Sum of lines b and c)		2,111,000.00
e. Total cash available (Sum of lines a and d)		1,300,193.25
f. Gross disbursements		2,879,588.45
g. Federal share of program income		0.00
h. Net disbursements (Line f minus line g)		2,879,588.45
i. Adjustments of prior periods		0.00
j. Cash on hand end of period	DEFICIT	\$ (1,579,395.20)

**12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING**

Days

**13. OTHER INFORMATION**

a. Interest income

\$

b. Advances to subgrantees or subcontractors

\$

**14. REMARKS (Attach additional sheets of plain paper, if more space is required)****15.****CERTIFICATION**

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
 CERTIFYING  
 OFFICIAL

SIGNATURE

*Marisa Schasel*  
 TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

10/12/95

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

**THIS SPACE FOR AGENCY USE**

\* Includes RQV 223 for \$ 659,000 paid 10/3/95

10/23/95  
 JP

# FEDERAL CASH TRANSACTIONS REPORT

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

## 2. RECIPIENT ORGANIZATION

Name PRESIDENT & FELLOWS OF HARVARD COLLEGE  
Office for Sponsored Research  
Number and Street : Holyoke Center - Room 466  
1350 Massachusetts Avenue  
Cambridge, MA 02138

City, State and ZIP Code:

## 3. FEDERAL EMPLOYER IDENTIFICATION NO.

04210350

1. Federal sponsoring agency and organizational element to which this report is submitted

Agency for International Development  
Washington, D.C. 20503

4. Federal grant or other identification number  
See 272A

5. Recipient's account number or identifying number  
See 272A

6. Letter of credit number  
72001468

7. Last payment voucher number  
228 ✓

Give total number for this period

8. Payment Vouchers credited to your account  
5

9. Treasury checks received (whether or not deposited)  
N/A

## 10. PERIOD COVERED BY THIS REPORT

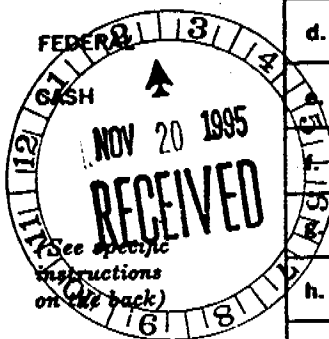
FROM (month, day, year)

10/01/95

TO (month, day, year)

10/31/95

## 11. STATUS OF



a. Cash on hand beginning of reporting period	DEFICIT	\$ (1,579,395.20)
b. Letter of credit withdrawals		3,079,000.00 *
c. Treasury check payments		0.00
d. Total receipts (Sum of lines b and c)		3,079,000.00
e. Total cash available (Sum of lines a and d)		1,499,604.80
f. Gross disbursements		2,646,890.77
g. Federal share of program income		0.00
h. Net disbursements (Line f minus line g)		2,646,890.77
i. Adjustments of prior periods		0.00
j. Cash on hand end of period	DEFICIT	\$ (1,147,285.97)

12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING

Days

## 13. OTHER INFORMATION

a. Interest income	\$
b. Advances to subgrantees or subcontractors	\$

14. REMARKS (Attach additional sheets of plain paper, if more space is required)

## 15.

### CERTIFICATION

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
CERTIFYING  
OFFICIAL

SIGNATURE

*Marisa Schasel*  
TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

11/14/95

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

\* Missing # 223 for \$659,000 paid 10/3/95

11/22/95  
OP



**FEDERAL CASH TRANSACTIONS REPORT**

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

Office of Management and Budget, No. 80-RO182

1. Federal sponsoring agency and organizational element to which this report is submitted

Agency for International Development  
Washington, D.C. 20503**2. RECIPIENT ORGANIZATION**

Name PRESIDENT & FELLOWS OF HARVARD COLLEGE  
Office for Sponsored Research  
Number and Street Holyoke Center - Room 466  
1350 Massachusetts Avenue  
Cambridge, MA 02138

City, State and ZIP Code:

4. Federal grant or other identification number  
See 272A5. Recipient's account number or identifying number  
See 272A6. Letter of credit number  
720014687. Last payment voucher number  
232

Give total number for this period

8. Payment Vouchers credited to your account  
49. Treasury checks received (whether or not deposited)  
N/A**10. PERIOD COVERED BY THIS REPORT**

FROM (month, day, year)

11/01/95

TO (month, day, year)

11/30/95

**3. FEDERAL EMPLOYER IDENTIFICATION NO.**

04210350

**11. STATUS OF**

FEDERAL

CASH

a. Cash on hand beginning of reporting period DEFICIT \$ (1,147,285.97)

b. Letter of credit withdrawals 1,860,000.00

c. Treasury check payments 0.00

d. Total receipts (Sum of lines b and c) 1,860,000.00

e. Total cash available (Sum of lines a and d) 712,714.03

f. Gross disbursements 1,558,498.74

g. Federal share of program income 0.00

h. Net disbursements (Line f minus line g) 1,558,498.74

i. Adjustments of prior periods 0.00

j. Cash on hand end of period DEFICIT \$ (845,784.71)

(See specific instructions on the back)

RECEIVED

12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING

Days

**13. OTHER INFORMATION**

a. Interest income \$

b. Advances to subgrantees or subcontractors \$

14. REMARKS (Attach additional sheets of plain paper, if more space is required)

**15.****CERTIFICATION**

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
CERTIFYING  
OFFICIAL

SIGNATURE

Marisa Schasel

TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

12/12/95

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

THIS SPACE FOR AGENCY USE

1/25/ab  
OP



**FEDERAL CASH TRANSACTIONS REPORT**

(See instructions on the back. If report is for more than one grant or assistance agreement, attach completed Standard Form 272-A.)

Approved: \_\_\_\_\_  
Office of Management and Budget, No. 80-RO182  
1. Federal sponsoring agency and organizational element to which this report is submitted  
Agency for International Development  
Washington, D.C. 20503**2. RECIPIENT ORGANIZATION**Name PRESIDENT & FELLOWS OF HARVARD COLLEGE  
Office for Sponsored Research  
Number and Street Holyoke Center - Room 466  
1350 Massachusetts Avenue  
Cambridge, MA 02138

4. Federal grant or other identification number See 272A

5. Recipient's account number or identifying number See 272A

6. Letter of credit number  
720014687. Last payment voucher number  
237

Give total number for this period

8. Payment Vouchers credited to your account  
59. Treasury checks received (whether or not deposited)  
N/A

City, State and ZIP Code:

**3. FEDERAL EMPLOYER IDENTIFICATION NO.**

04210350

**10. PERIOD COVERED BY THIS REPORT**FROM (month, day, year)  
12/01/95TO (month, day, year)  
12/31/95**11. STATUS OF**

FEDERAL

CASH

1996

(See specific instructions on the back)

a. Cash on hand beginning of reporting period	DEFICIT	\$ (845,784.71)
b. Letter of credit withdrawals		2,166,000.00 *
c. Treasury check payments		0.00
d. Total receipts (Sum of lines b and c)		2,166,000.00
e. Total cash available (Sum of lines a and d)		1,320,215.29
f. Gross disbursements		2,612,468.64
g. Federal share of program income		0.00
h. Net disbursements (Line f minus line g)		2,612,468.64
i. Adjustments of prior periods		0.00
j. Cash on hand end of period	DEFICIT	\$ (1,292,253.35)

**12. THE AMOUNT SHOWN ON LINE 11j, ABOVE, REPRESENTS CASH REQUIREMENTS FOR THE ENSUING**

Days

**13. OTHER INFORMATION**

a. Interest income

\$

b. Advances to subgrantees or subcontractors

\$

**14. REMARKS (Attach additional sheets of plain paper, if more space is required)****15.****CERTIFICATION**

I certify to the best of my knowledge and belief that this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant or agreement

AUTHORIZED  
CERTIFYING  
OFFICIAL

SIGNATURE

TYPED OR PRINTED NAME AND TITLE

Marisa Schasel - Cash Manager

DATE REPORT SUBMITTED

1/10/96

TELEPHONE (Area Code, Number, Extension)

(617) 496-2507

**THIS SPACE FOR AGENCY USE**

\* Includes 236 + 237 for \$180,000 + \$811,000 paid 1/2/96

1/25/96  
90